

Work Order ID 110643

110643

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Item ID: 646.3001 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Lower Cutter Assy
 Start Date: 1/07/14 Start Qty: 4.00 *4* Cust Item ID:
 Required Date: 1/07/14 Req'd Qty: 4.00 *4* Customer:
 Reference:

Approvals: Process Plan: ML5 Date: 14-01-07 Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
646.3000	N/C

110	Pick Kit	0.00							
110									
Packaging	Memo	0.00				4			05 14-01-23
Packaging									

120		0.00							
120									
Small Fab	Memo	0.00				4			05 14-01-23
Small Fab	Assemble as per dwg and apply loctite 598 on all faying surfaces shown on dwg per note 7.								
	A/R RTV LOCTITE 598: <u>125306</u>								
	exp. date: <u>14/04/16</u>								

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 110643

110643

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Item ID: 646.3001 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Lower Cutter Assy
 Start Date: 1/07/14 Start Qty: 4.00 *4* Cust Item ID:
 Required Date: 1/07/14 Req'd Qty: 4.00 *4* Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 *130* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo	0.00 0.00 DAS 27 9-89 14/1/31				4			
140 *140* Packaging Packaging	Identify as per dwg & Stock Location Memo ***IDENTIFY AS PER APICAL MPP-120 BY STAMPING THE P# AND REV***	0.00 0.00 81428A				4x		14-1-31	DAS 26 9-89
150 *150* QC Quality Control	QC21- Final Inspection - Work Order Release Memo	0.00 0.00						MLS 14-02-03 14-1-31	

DQA: _____ Date: _____



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Work Order update only ☐

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Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
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Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
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Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____
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Picklist Print

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Page 1

Work Order ID: 110643
Parent Item: 646.3001
Parent Item Name: Lower Cutter Assy

Start Date: 1/07/14
Start Qty: 4.00

Required Date: 1/07/14
Required Qty: 4.00

Comments: IPP REV:A 12.10.19 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MS21042L08 Nut		Purchased	No				Each	4,383.0000		40		m/m 14.01.22	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST314		58				127304			
				123900		58							
				ST508		3400							
				125445		1900							
				m127410		1500							
				ST509		925							
				m127304		925							
646.3010 LH Half		Manufactured	No			110	Each	20.0000	1	4		m/m 14.01.22	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				CA		20				99832			
				108521		12							
				99832		8							
646.3011 RH Half		Manufactured	No			110	Each	16.0000	1	4		m/m 14.01.22	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				CA		16				107677			
				107677		8							
				99787		8							
646.3012 Lower Guide		Manufactured	No			110	Each	22.0000	1	4		m/m 14.01.22	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				CA		22				102843			
				102843		7							
				108193		6							
				96712		4							
				97092		5							

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

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Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
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FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

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Page 2

Work Order ID: 110643
Parent Item: 646.3001
Parent Item Name: Lower Cutter Assy

Start Date: 1/07/14

Required Date: 1/07/14

Start Qty: 4.00

Required Qty: 4.00

646.3013 Manufactured No 110 Each 22.0000 1 4 W/W 14.01.22

Blade

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
CA	22	
102802	8	
<u>106687</u>	8	
108183	6	

106687

646.3014 Manufactured No 110 Each 18.0000 1 4 W/W 14.01.22

Blade

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
CA	18	
102901	8	
<u>107626</u>	10	

107626

646.3015 Manufactured No 110 Each 53.0000 1 4 W/W 14.01.22

Blade

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
CA	53	
107339	21	
107664	10	
92893	2	
<u>93344</u>	20	

93344

MS27039-08-19 Purchased No 110 Each 2,088.0000 19 76 W/W 14.01.22

Screw

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
ST506	2088	
124309	1200	
125654	238	
m127410	400	
<u>m127831</u>	250	

127831

DQA: _____ Date: _____



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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
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Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

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Page 3

Work Order ID: 110643

Parent Item: 646.3001

Parent Item Name: Lower Cutter Assy

Start Date: 1/07/14

Required Date: 1/07/14

Start Qty: 4.00

Required Qty: 4.00

NAS1149FN832P

Purchased

No

110

Each

12,111.000

38

152

WHL 14.01.22

Washer

Location

Loc Qty

Loc Code

ST295

2111

123900

123522

400

123900

1711

st510

10000

125268

10000

DQA: _____ Date: _____



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Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

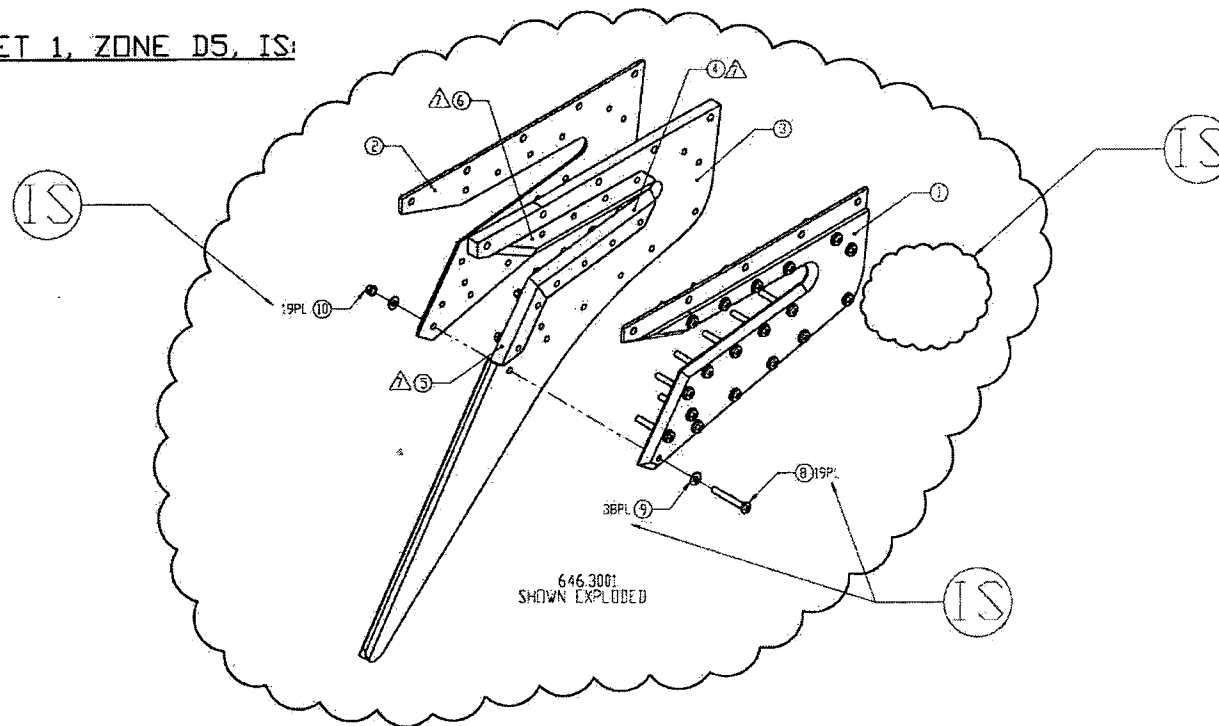
FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
--	--	---	--

APICAL
INDUSTRIES, INC.

ENGINEERING CHANGE NOTICE NO.		02195		SHEET 1 OF 4	
DWG NO.	646.3000	REV: N/C	PREPARED BY	S. HUFF	DATE: 01/05/09
DWG TITLE:		LOWER CUTTER ASSY			
APPROVED BY:	ENGR <i>[Signature]</i>	MFG <i>[Signature]</i>	QC <i>[Signature]</i>	EFF:	NEXT ORDER
TRANSACTION CODES (TC): A-ADD C-CREATE R-REVISE D-DELETE		REASON: REMOVED RIVETS IN FAVOR OF ADDITIONAL SCREWS			

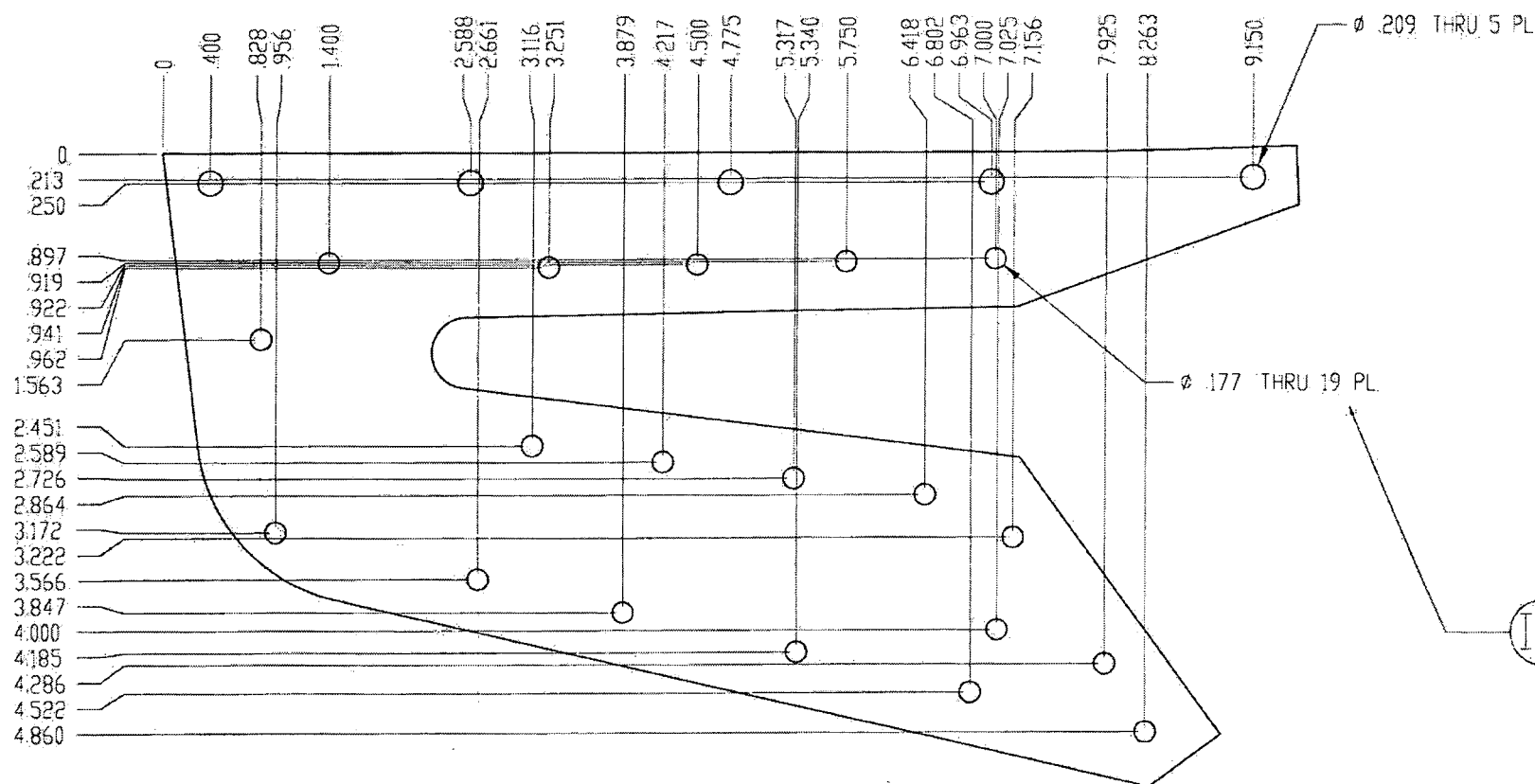
SHEET 1, ZONE D5, IS:



110643 MJS
14-01-07

10	R	601.1541	19	LOCKNUT	MS21042L08
9	R	601.2764	38	WASHER	NAS1149FN832P
8	R	601.2765	19	SCREW	MS27039-0819
7	D	601.2766	2	RIVET	MS20470AD5-18
			.3001		
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION
DOCUMENTS EFFECTED:				<input type="checkbox"/> MDL <input checked="" type="checkbox"/> INSTALL INSTRUC <input checked="" type="checkbox"/> ICA <input type="checkbox"/> FMS <input checked="" type="checkbox"/> BOM	CHANGE CATEGORY <input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR
				DER REVIEW REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

SHEET 3 IS:

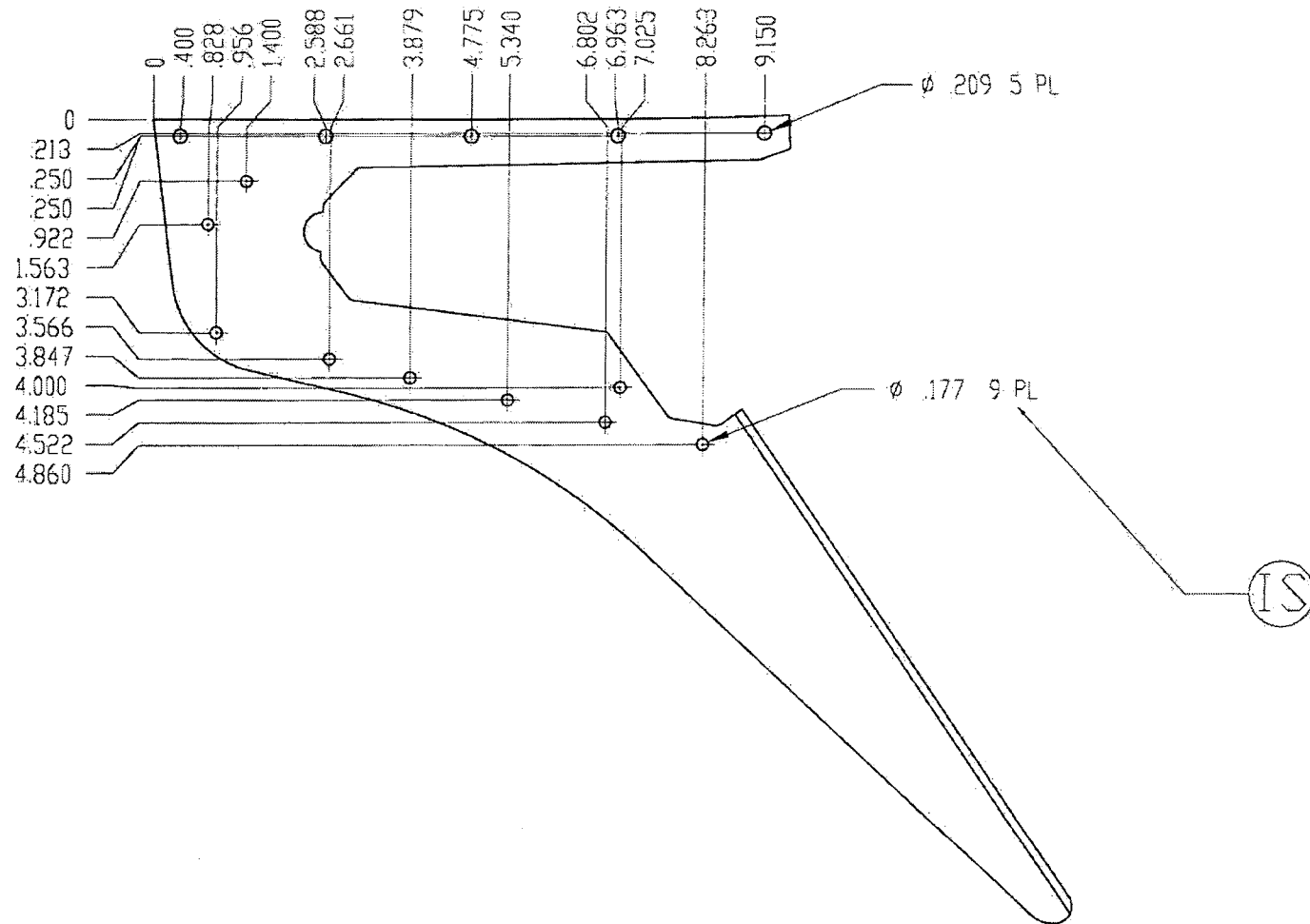


SECTION A-A

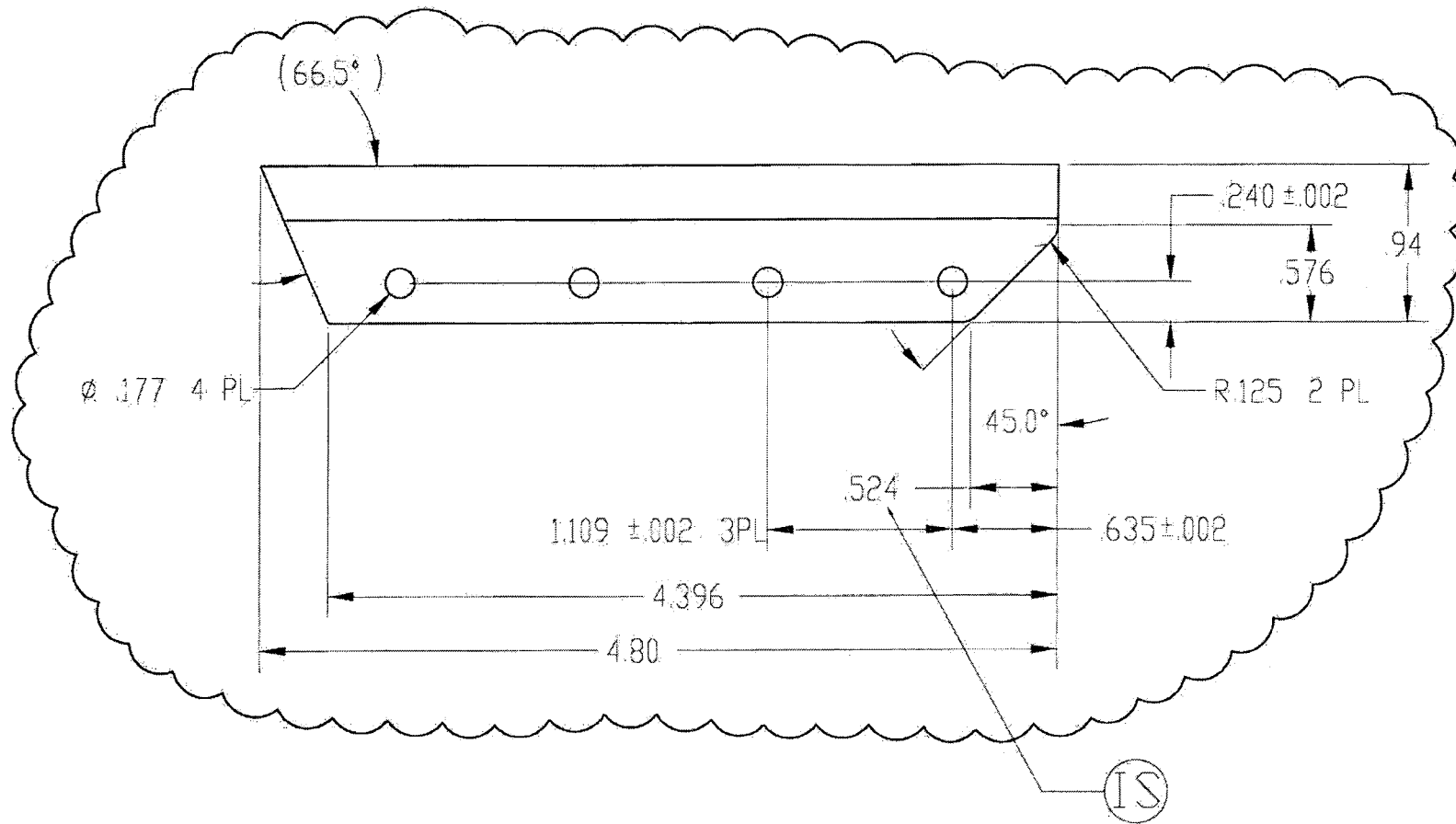
2
C7

F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION

SHEET 5 IS:



F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION

SHEET 6, ZONE C4, IS:

F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION

NOTES:

- ① MATERIAL: ALUMINUM 7075-T651 PER AMS-QQ-A-250/12

② FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III,
CLASS 2, COLOR BLACK;
CARDINAL 4860-50 PRETREATMENT PRIMER
PRIME IAW MIL-P-23377 J TYPE I CLASS N

③ MATERIAL: AISI A2 TOOL STEEL
CONDITION: ANNEALED
POST PROCESS: HEAT TREAT TO 58-62 Rc ROCKWELL HARDNESS

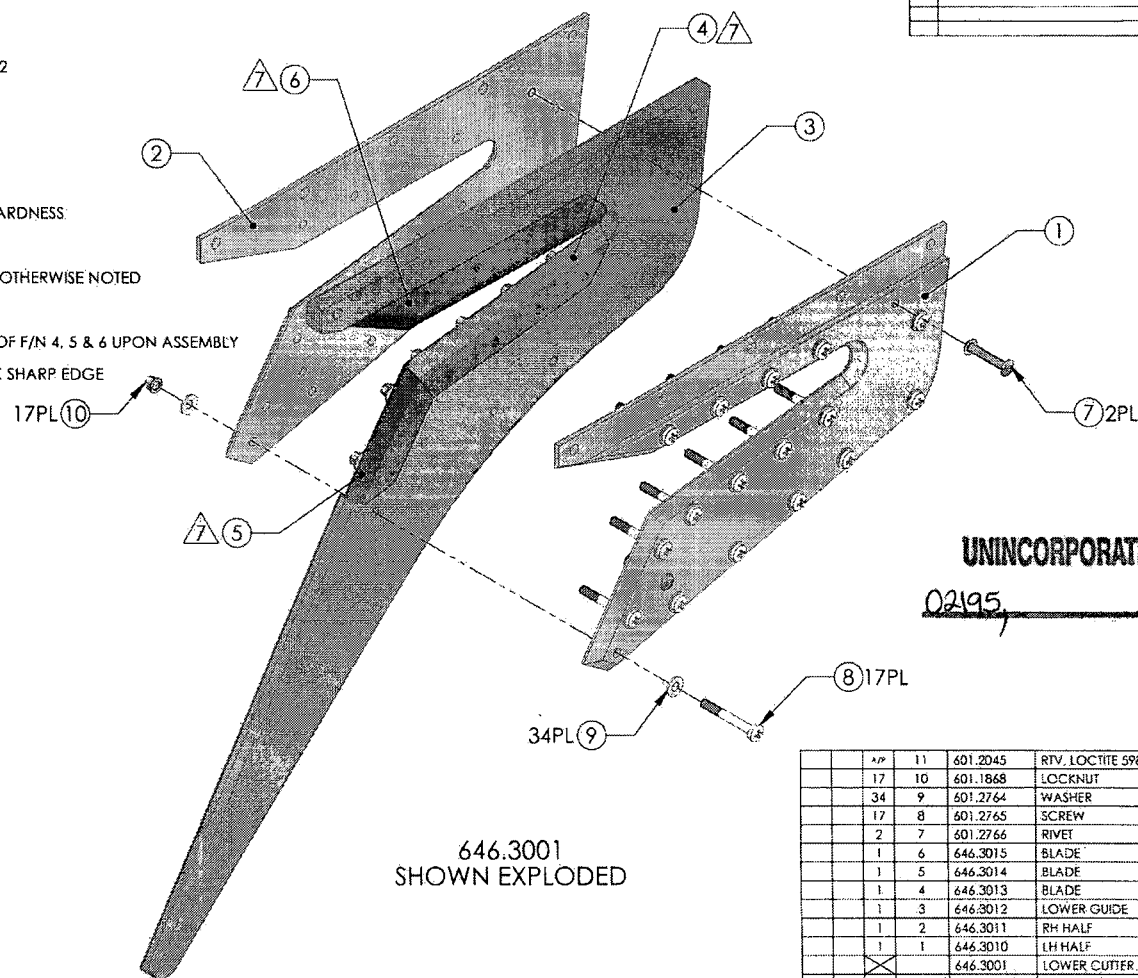
④ FINISH: PRIME IAW MIL-P-23377 J TYPE I CLASS N

5. DEBURR AND BREAK ALL SHARP EDGES EXCEPT WHERE OTHERWISE NOTED

6. IDENTIFY IAW MPP-120

⑦ APPLY F/N 11 AS REQUIRED TO ALL FAYING SURFACES OF F/N 4, 5 & 6 UPON ASSEMBLY

⑧ CUTTING EDGE INTENDED TO BE SHARP, DO NOT BREAK SHARP EDGE



646.3001
SHOWN EXPLODED

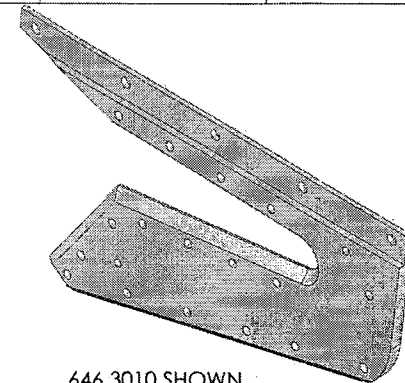
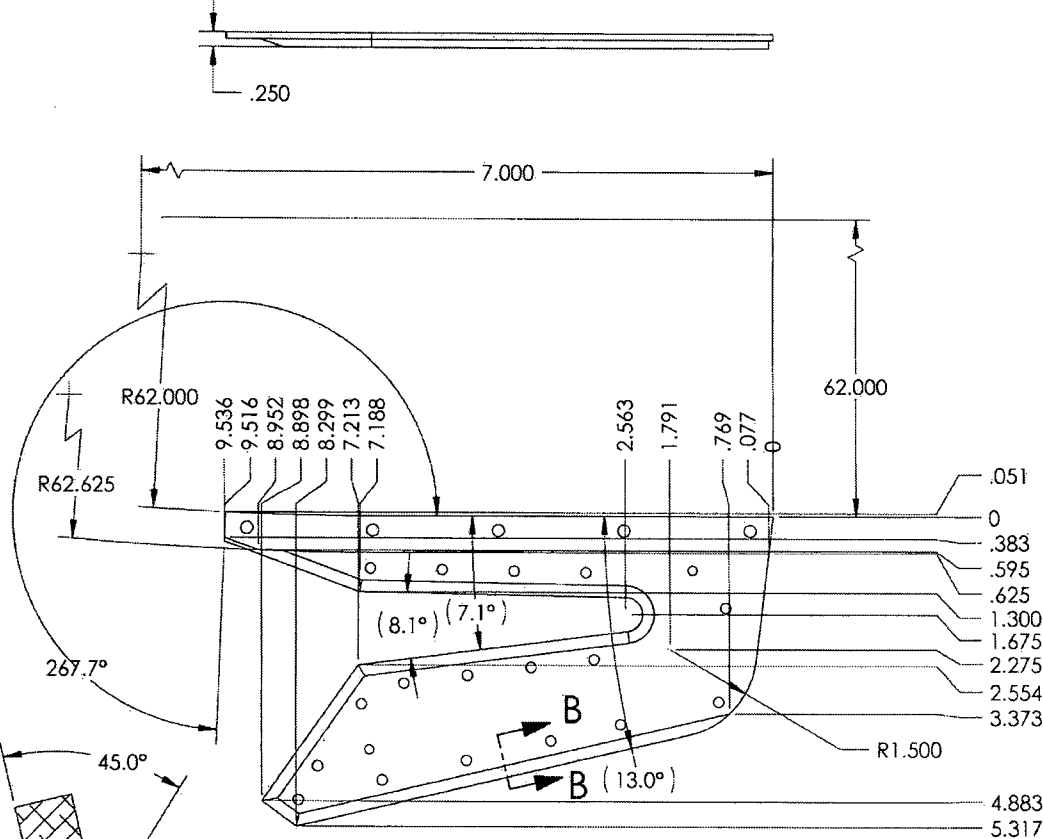
REVISIONS			
REV	DESCRIPTION	DATE	APPROVE

UNINCORPORATED ECN(S)

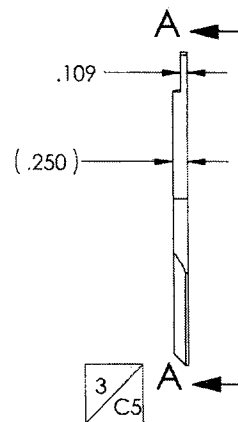
02195

[illegible]

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646.3010 SHOWN
646.3011 OPPOSITE

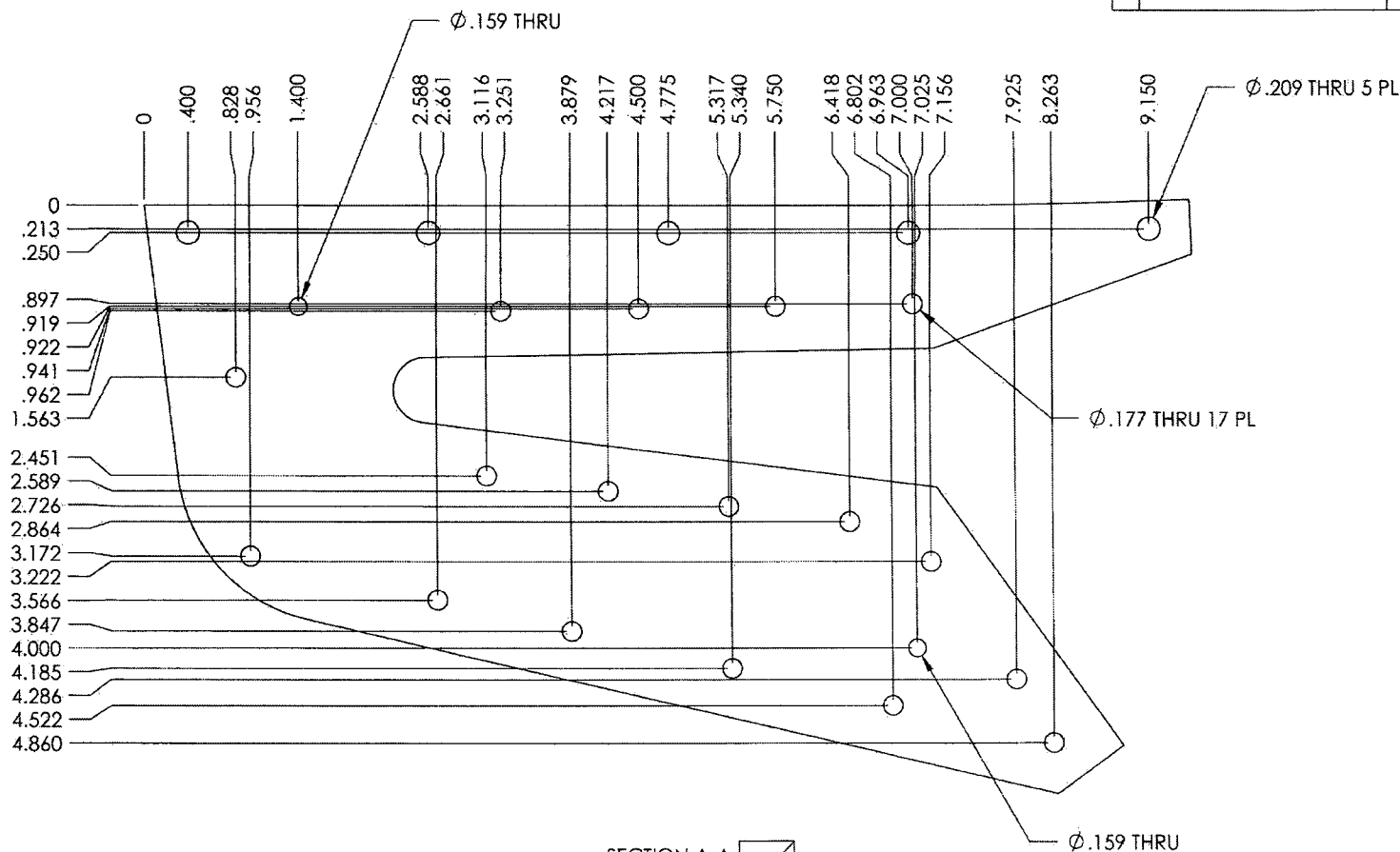


SECTION B-B
TYP EDGE DETAIL

ORIGINAL DATE (DD-MM-YY) 08-24-08		APICAL INDUSTRIES	
DRAWN BY: J. JOSEPH		2608 TEMPLE HEIGHTS DR.	
P. BRAYO		OCEANSIDE, CA. 92056-3512 (760) 724-5300	
DRAWING APPROVAL J. JOSEPH		LOWER CUTTER ASSY	
CONTRACT NO.		SEE SCALE CODE	REV. N/C
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 1 PLACE DECIMALS ±.01 2 PLACE DECIMALS ±.005 ANGLES ±.5°		DWG. NO. 646.3000	
		SCALE: NONE	SHEET 2 OF 8

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REVISIONS			
REV	DESCRIPTION	DATE	APPROVED

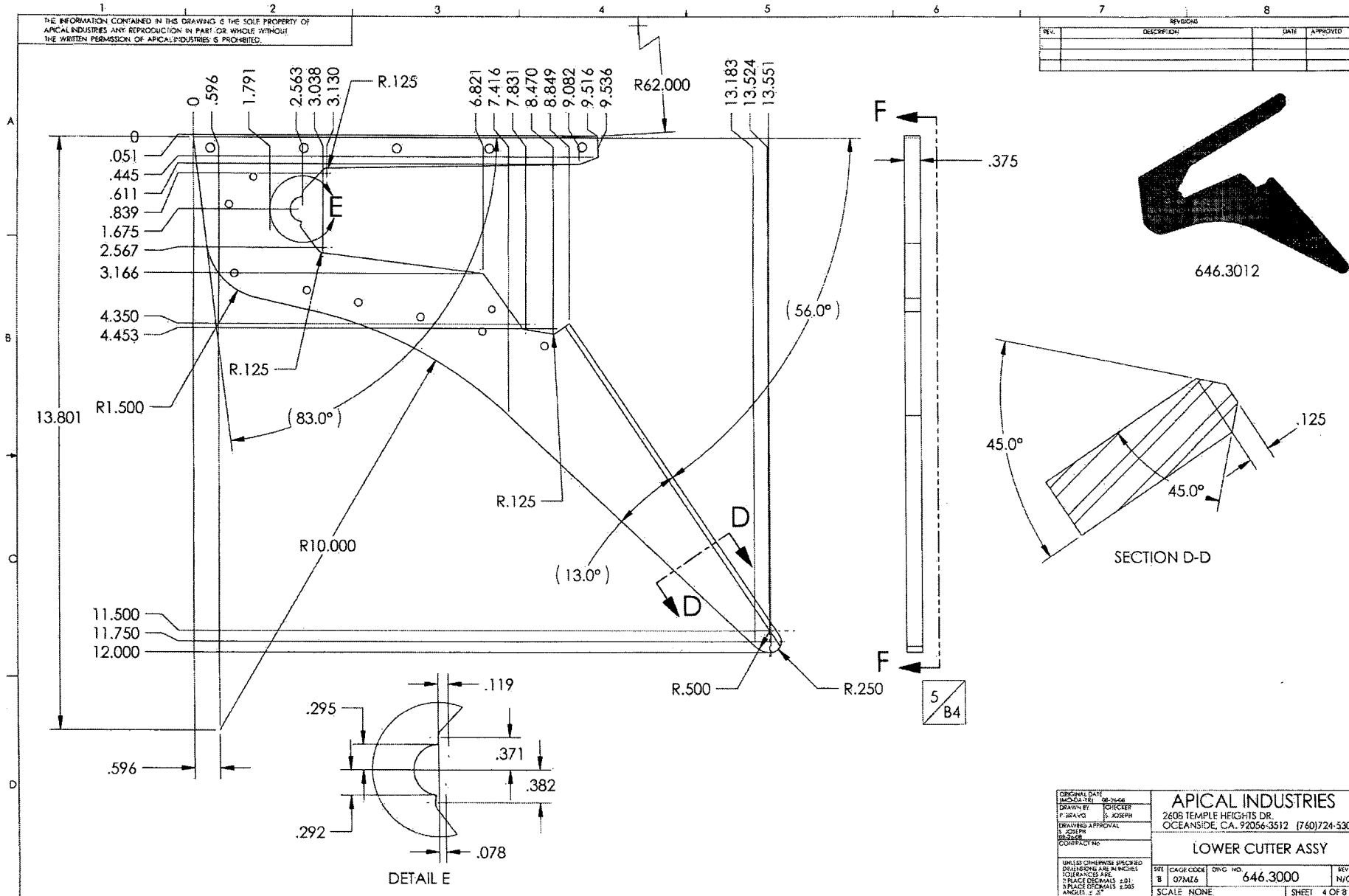


SECTION A-A 2 / C7

ORIGINAL DATE (W/D, D, Y) 08-24-08	APICAL INDUSTRIES			
DRAWN BY P. BRAVO	2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300			
CHECKED BY S. JOSEPH	DRAWING APPROVAL: S. JOSEPH 08/26/08			
CONTRACT NO.	LOWER CUTTER ASSY			
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 1 PLACE DECIMALS ±.010 2 PLACE DECIMALS ±.005 ANGLES ±.5°	SIZE	CAGE CODE	DWG. NO.	REV
	B	07426	646.3000	N/C
	SCALE	NONE		1 SHEET 3 OF 8

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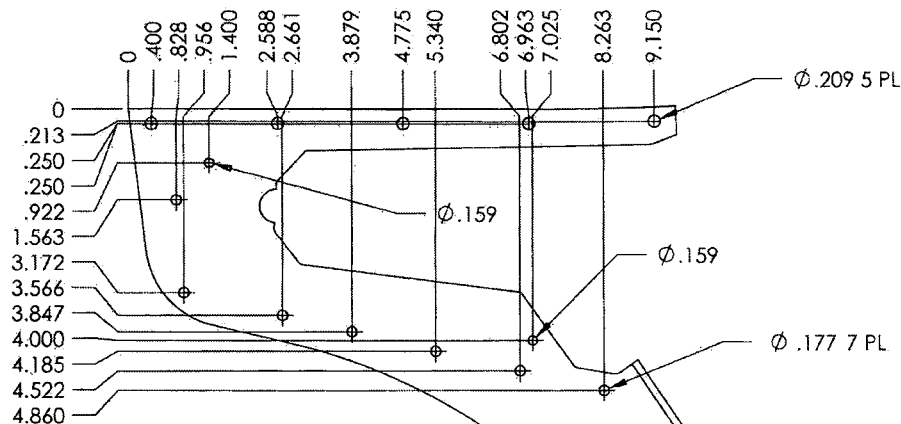
REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



ORIGINAL DATE 10/20/81		APICAL INDUSTRIES	
DESIGNED BY P. BRAVO		2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
DRAWN BY S. JOSEPH		LOWER CUTTER ASSY	
CHECKED BY S. JOSEPH		SCALE: NONE	SHEET: 4 OF 8
CONTRACT NO.		DATE: 07/21/86	REV: N/C
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS ±.01 2 PLACE DECIMALS ±.005 ANGLES ±.5°		DWG. NO.: 646.3000	REV: N/C

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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED

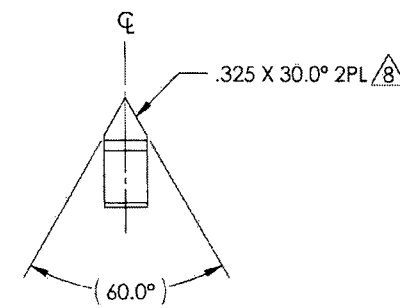
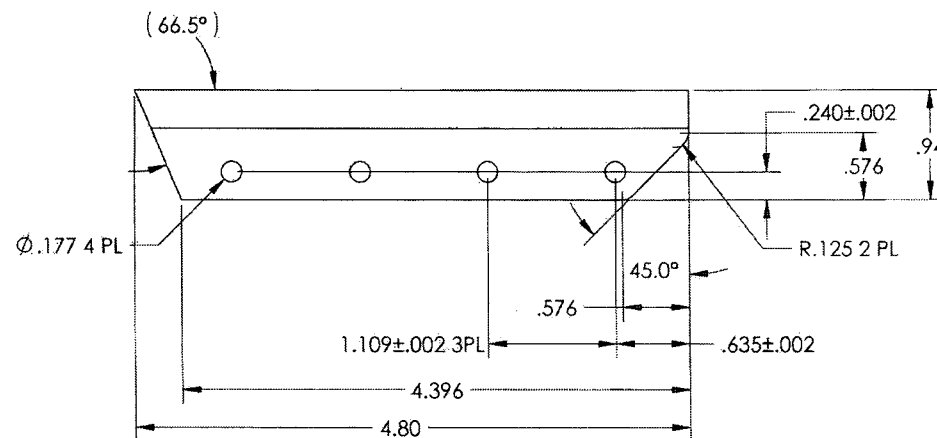
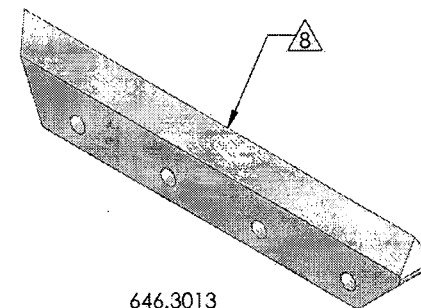
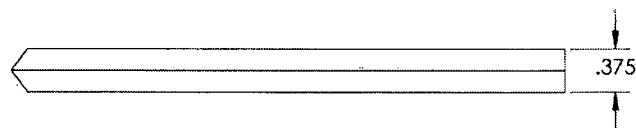


SECTION F-F 4/B6

ORIGINAL DATE JAN 04 1998 DESIGNED BY P. BRAVO DRAWING APPROVAL J. JOSEPH CHECKED C. JOSEPH		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 7 PLACE DECIMALS ±.01 3 PLACE DECIMALS ±.003 ANGLES ±.5°		LOWER CUTTER ASSY	
SHEET	CAGE CODE	DWG. NO.	REV.
8	07M25	646.3000	N/C
SCALE: NONE		SHEET 5 OF 8	

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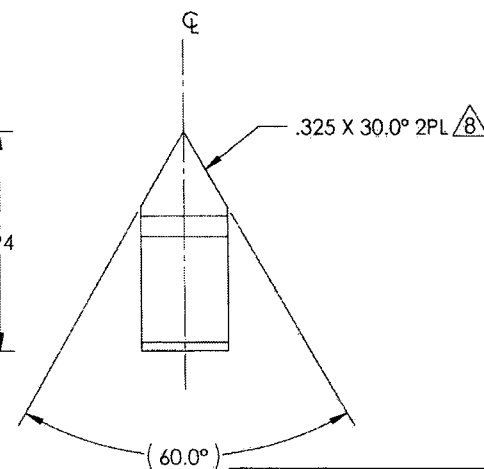
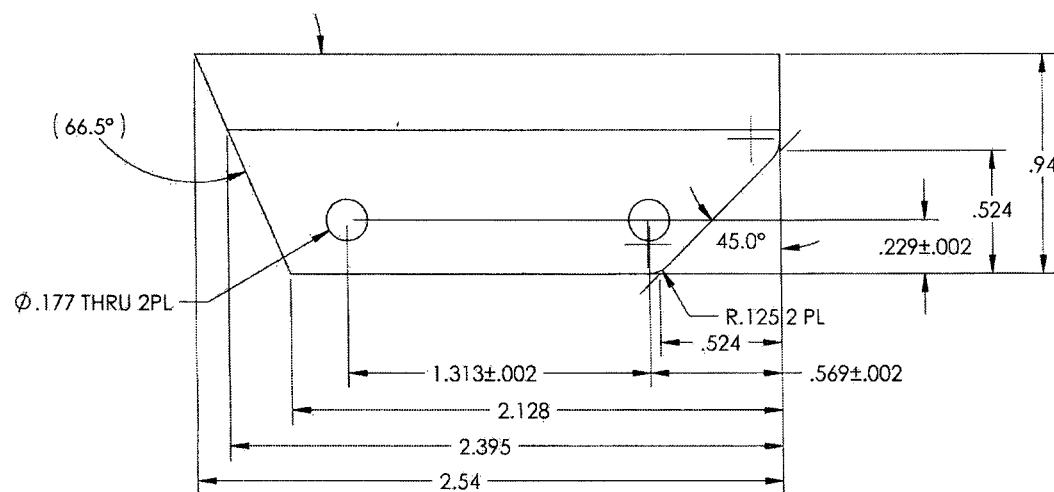
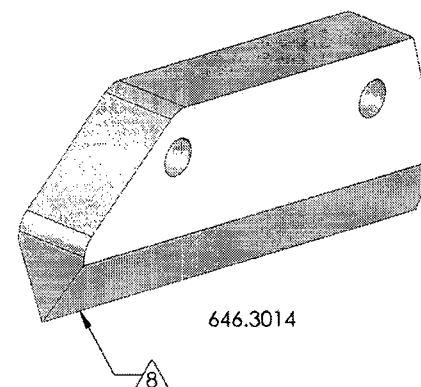
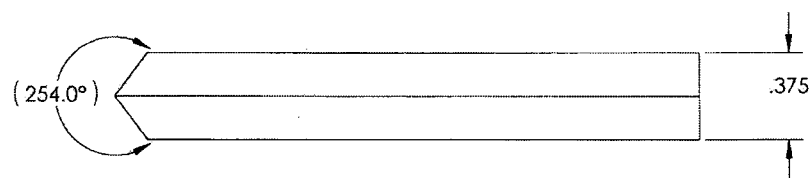
REVISIONS			
REV	DESCRIPTION	DATE	APPROVED



ORIGINAL DATE MODIFIED		APICAL INDUSTRIES	
DRAWN BY: J. CRECHER		2608 TEMPLE HEIGHTS DR.	
P. BRAYO		OCEANSIDE, CA. 92056-3512 (760)724-5300	
DRAWING APPROVAL		LOWER CUTTER ASSY	
J. JOHNSON		SEE CAGE CODE	
CONTRACT NO.		DWD. NO. 646.3000	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS $\pm .001$ ANGLES $\pm .5^\circ$		REV. N/C	REV. N/C
SCALE: NONE		SHEET 6 OF 8	

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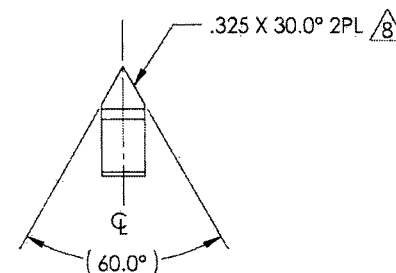
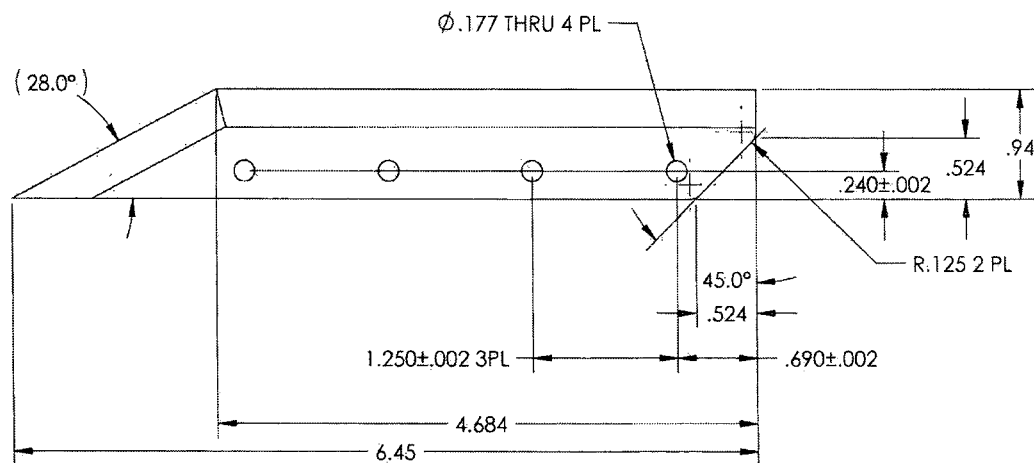
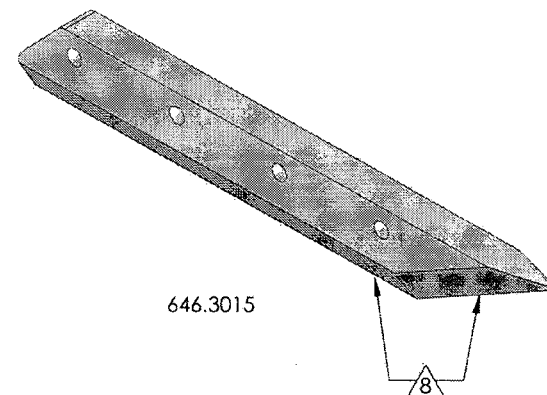
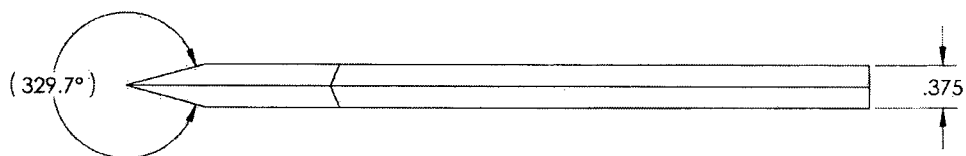
REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



ORIGINAL DATE: 05-24-08 DRAWN BY: J. JOSEPH DESIGNED BY: J. JOSEPH CHECKED BY: J. JOSEPH CONTRACT NO.:		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS ±.01 3 PLACE DECIMALS ±.003 ANGLES ± 1°		SHEET: B CAGE CODE: 07M26 SCALE: NONE	REV: N/C DWG. NO: 646.3000 SHEET: 7 OF 8

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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



ORIGINAL DATE DWG DATE: 08/24/08 DRAWN BY: J. JOSEPH P. BRAVO DRAWING APPROVAL E. JOSEPH DATE: 08/24/08 CONTRACT NO.		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
IF ALL DIMENSIONS SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACES OF DECIMALS ±.01 2 PLACES OF DECIMALS ±.005 ANGLES ±.3°		LOWER CUTTER ASSY	
SHEET B	CAGE CODE 07ME6	DWG. NO. 646.3000	REV. N/C
SCALE NONE		SHEET 8 OF 8	